PHARMACARE NEWSLETTER

November 7, 2001
01-14

Web site: http://www.hlth.gov.bc.ca/pharme/newsletter/index.html

PLEASE CIRCULATE AMONG DISPENSING STAFF

METHADONE MAINTENANCE PROGRAM

Methadone for maintenance is dispensed as 1 mg/ml. However, there are specific situations where methadone for maintenance may be dispensed as 2 mg/ml.

Physicians require prior permission from the College of Physicians and Surgeons to prescribe any strength of methadone for maintenance, in a concentration greater than 1 mg/ml. Physicians can contact Peter Hickey at the College of Physicians and Surgeons, by telephone at (604) 733-7758 or by fax at (604) 733-1267. Please note that, concurrent with the new Methadone Maintenance Program, Pharmacare has issued 2 PINs for each strength; one for dispensations involving direct interaction with the patient (for pharmacies participating in the new payment program), and one fee for dispensations that do not involve direct patient interaction. There is deemed to be no patient interaction when methadone is provided to incarcerated patients, patients in pre-trial facilities, Plan B patients or to physicians for administration to patients.

The methadone PINs are listed in the table below.

METHADONE PIN (MAINTENANCE)	DESCRIPTION
66999990	1 mg/ml - involving ***direct*** patient interaction
66999991	1 mg/ml - without direct patient interaction
66999992	2 mg/ml - without direct patient interaction
66999993	2 mg/ml -involving ***direct*** patient interaction

HEPATITIS TREATMENT ADJUDICATION COMMITTEE

Pharmacare has established a Hepatitis Treatment Adjudication Committee with Dr. Urs Steinbrecher as chair and Drs. Frank Anderson and Eric Yoshida as members. This committee will help Pharmacare adjudicate antiviral treatment which may be clinically appropriate even though there is insufficient published data for inclusion in standard guidelines. When patients do not meet standard treatment eligibility criteria the expert panel will provide a case-by-case assessment of treatment requests.

DRUG WITHDRAWAL Baycol® (cerivastatin)

Bayer has discontinued the marketing and distribution of Baycol® (cerivastatin) in Canada. This product is not available through Health Canada's Special Access program at this time. As a result, effective August 16, 2001, Baycol® (cerivastatin) is no longer available as a Pharmacare benefit. These DINs include 2237325 (0.2mg), 2237326 (0.3mg), 2241466 (0.4mg), and 2243223 (0.8mg).

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LCA UPDATES

Due to product unavailability or discontinuation, the following categories have been removed from the current LCA program:

* Chlorthalidone tablets 50 mg
* Chlorthalidone tablets 100 mg
* Fluphenazine tablets 1 mg
* Meprobamate tablets 400 mg

NEW PRODUCTS CATEGORIZED TO LCA and/or RDP

The following new products under the Low Cost Alternative Program (LCA) / Reference Drug Program (RDP) have been included as eligible Pharmacare benefits on Plans A, B, C, E & F:

DIN	MAN	DRUG NAME	FULL/ PARTIAL	LCA/RDP Price	Short Term	Long Term	Plan G Eligible	Eligible for Palliative Care
2238568	PMS	PMS-Fluorometholone (fluorometholone) drops susp. 0.01%	P	1.7807	Y			
2236866	NOP	Haloperidol (haloperidol decanoate) vial 50mg/ml	P	6.0631		Y	Y	Y
2242631	NOP	Haloperidol LA (haloperidol decanoate) vial 100mg/ml	P	11.8139		Y	Y	Y
2242826	FRS	Vaseretic® (enalapril maleate/hctz) tabs 5-12.5mg	P	0.8546		Y		Y

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BENEFITS

The following new products have been included as eligible Pharmacare benefits on Plans A, B, C, E and F

DIN	MAN	DRUG NAME	Short Term	Long Term	Plan G Eligible	Cystic Fibrosis
2243770	KNR	Alti-Amoxi Clav (amox tr potassium clavulanate) tabs 250-125mg	Y			
2243771	KNR	Alti-Amoxi Clav (amox tr potassium clavulanate) tabs 600-125mg	Y			
2242374 (old DIN 591548)	JSO	Pancrease (amylase lipase protease) caps DR 20-4.5-25		Y		Y
2241795 (old DIN 262676)	UNK	Procytox (cyclophosphamide) tabs 25mg		Y		
2241796 (old DIN 13749)	UNK	Procytox (cyclophosphamide) tabs 50mg		Y		
2243097	PFI	Lipitor® (atorvastatin calcium) tabs 80mg		Y		
2243878	UNK	SERC® (betahistine HCl) tabs 16mg		Y		
2243116	APX	Apo-Trimethoprim (trimethoprim) tabs 100mg		Y		
2243117	APX	Apo-Trimethoprim (trimethoprim) tabs 200mg		Y		

NON BENEFITS

Pharmacare recently completed the review of the following products and these products will not be added as benefits under the program

DIN	MAN	DRUG NAME
2243880	APX	Apo-Loratadine tabs 10mg
2243253	APX	Apo-Midazolam inj. (midazolam HCl) vial 1mg ml
2243254	APX	Apo-Midazolam inj. (midazolam HCl) vial 5mg ml

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LIMITED COVERAGE DRUGS

Special Authority Only (criteria follows)

DIN	MAN	DRUG NAME	Short Term	Long Term
2244344	BOE	Micardis® Plus (telmisartan/hctz) tabs 80-12.5mg		Y
2244021	AZC	Atacand® Plus (candesartan cilexetil/hctz) tabs 16-12.5mg		Y
2240346	NOP	Novo-Terbinafine (terbinafine HCl) tabs 250mg		Y
2243737	SIL	Phentolamine Mesylate inj.(Sabex) vial 5mg		Y

Micardis® Plus (telmisartan/hctz)
Atacand® Plus (candesartan cilexetil/hctz)

- for the treatment of hypertension for patients who have experienced a cough with ACE inhibitors that also require a diuretic

Novo-Terbinafine (terbinafine HCl)

- for the treatment of severe onychomycosis of the fingernails and or of the toenails
  (a) causing functional disability and
  (b) confirmed by positive KOH examination and or fungal culture indicating dermatophyte(s) of the nail performed in a licensed laboratory

Phentolamine Mesylate inj.(Sabex)

- eligible under the limited drug coverage program through the special authority process only in compounded mixtures for use in the treatment of erectile dysfunction.

DRUGS UNDER REVIEW

The following drug submissions are currently under review by the Drug Benefit Committee of Pharmacare

alendronate (FOSAMAX®), resubmission
ancestim (STEMGEN®)
azithromycin (ZITHROMAX®), resubmission
bisoprolol (MONOCOR®), resubmission
botulinium toxin (BOTOX®)
desmopressin (DDAVP®) tablets, new indication
entacapone (COMTAN®)
eprosartan (TEVETEN®), resubmission
esomeprazole magnesium trihydrate (NEXIUM®)
etanercept (ENBREL®)
filgrastim (NEUPOGEN®), new indication
fusidic acid 1% (FUCITHALMIC®)
galantamine hydrobromide (REMINYL®)
gatifloxacin (TEQUIN®)
hydromorphone controlled release (HYDROMORPH CONTIN®), resubmission
levonorgestrel releasing intrauterine system (MIRENA®)
linezolid (ZYVOXAM®)
mirtazapine (REMERON®)
mometasone furoate (AZMAX Twisthaler®)
moxifloxacin (AVELOX®)
oseltamivir (TAMIFLU®), resubmission
norethindrone acetate/ethinyl estradiol (FemHRT®)
oxycodone controlled release (OXYCONTIN®), resubmission
peginterferon alfa-2b (PEG-INTRON®)
riluzole (RILUTEK®)
risedronate (ACTONEL®), new indication
rivastigmine (EXELON®), resubmission
salmon calcitonin nasal spray (MIACALCIN®), resubmission
testosterone (ANDRODERM®)